



APPLICATION FOR A LICENSE TO CONDUCT A SCHOOL OF BARBERING IN THE STATE OF INDIANA

State Form 44671 (R / 5-00)

Approved by State Board of Accounts, 2000

INDIANA STATE BOARD OF BARBER
EXAMINERS
302 W. Washington St., Rm E034
Indianapolis, Indiana 46204

Biennial License Fee: \$300.00

License number

Date issued

The following documents shall accompany the application:

1. Detailed drawing of barbering school premises, including size of the building and number of barber chairs.
2. Financial statement, certified by a public accountant, or certified public accountant including assets, liabilities and net worth of the person, partnership or corporation applicant.
3. Evidence of a performance bond of twenty-five thousand dollars (\$25,000) guaranteeing the operation of such school of barbering for three (3) years and conditioned upon compliance with barbering laws and rules.
4. Copy of curriculum, tuition rates and student contract. The curriculum shall be organized in written form showing the sequence in which various subjects are to be taught and the number of sessions or hours for each subject.
5. State Fire Marshall inspection report.
6. Copy of current corporate filings.
7. Biennial license fee.

I (we) hereby make application for a license to conduct a school of barbering in the state of Indiana under the provisions of the Indiana State Board of Barber Examiners, IC 25-7-1 and Title 876.

Name of school of barbering

Telephone number

Address (number and street, city, state, ZIP code)

Social Security number and / or Federal ID number *

* Social Security number and / or Federal ID number is requested by this agency in accordance with IC 4-1-8-1, and is not mandatory that it be given. These numbers are available to the Indiana Department of Revenue.

BARBERING INSTRUCTORS

CERTIFICATE NUMBER

Proposed number of students

INDIVIDUAL, PARTNERS OR CORPORATE OFFICERS

NAME

ADDRESS

TITLE

If a corporation, date and state of incorporation:

Date of incorporation

State of incorporation

Approximate opening date

(Continued on the reverse side)

AFFIDAVIT

Applicant hereby acknowledges and consents to the inspection of the proposed school by two (2) or more board or staff members prior to the scheduled opening of school.

Applicant hereby certifies: that applicant will comply with the licensing requirements under IC 25-7-1 and Title 876; Rule 1, Sanitary Requirements for Barber Schools and Shops; Rule 2, Barber School approval; Requisites Curriculum, including the barbering school equipment (816 IAC 1-2-9) and facility requirement (816 IAC 1-2-10); and that applicant, if an individual, partners of a partnership, or officers of a corporation has not been convicted of an act which would constitute a ground for disciplinary sanction under IC 25-7-1-16.1 or a felony that has direct bearing on the applicant's ability to practice competently.

NOTARY CERTIFICATE (SWORN OATH)

STATE OF _____ }
COUNTY OF _____ } SS:

I, _____, having been duly sworn on oath, say that I am the above-named applicant, that I have personally prepared the foregoing application, and that the same is true to the best of my knowledge and belief.

Signature of individual / partner / corporate officer	Signature of Notary Public	
Printed or typed name of individual / partner / corporate officer	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of residence	Date commission expires